



95TH GENERAL ASSEMBLY

State of Illinois

2007 and 2008

HB0146

Introduced 1/19/2007, by Rep. Tom Cross - Ed Sullivan, Jr.

SYNOPSIS AS INTRODUCED:

New Act
30 ILCS 805/8.31 new

Creates the Care of Students with Diabetes Act. Requires a diabetes management and treatment plan to be developed for each student with diabetes who seeks assistance with the routine diabetes care needed in daycare, at school, or at school-related activities and events. Provides that upon receipt of a student's diabetes management and treatment plan, the school principal and school nurse shall develop an individualized care plan with the student's parent or guardian. Provides that at each school in which a student with diabetes is enrolled, the principal shall seek school employees to serve as unlicensed diabetes care aides. Provides that for each school in which a student with diabetes seeks assistance, the school must ensure that every day and at all activities at which the student is present there is either a school nurse or an unlicensed diabetes care aide to provide care. Contains additional provisions concerning requirements for the diabetes management and treatment plan and the individualized care plan, training for unlicensed diabetes care aides, required care of students with diabetes, independent monitoring and treatment of students with diabetes, and school employee immunity. Amends the State Mandates Act to require implementation without reimbursement. Effective immediately.

LRB095 03968 NHT 24001 b

FISCAL NOTE ACT
MAY APPLY

STATE MANDATES
ACT MAY REQUIRE
REIMBURSEMENT

A BILL FOR

1 AN ACT concerning education.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 1. Short title. This Act may be cited as the Care
5 of Students with Diabetes Act.

6 Section 5. Legislative findings. The General Assembly
7 makes all of the following findings:

8 (1) Diabetes is a serious chronic disease that impairs
9 the body's ability to use food for energy. Insulin is a
10 hormone produced by the pancreas that helps convert food
11 into energy. In people with diabetes, either the pancreas
12 does not make insulin (type 1) or the body cannot use
13 insulin properly (type 2). Without insulin, the body's main
14 energy source, glucose, cannot be used to fuel the body so
15 glucose builds up in the blood. Over many years, high blood
16 glucose can cause damage to the eyes, kidneys, nerves,
17 heart, and blood vessels.

18 (2) Children with diabetes still face discrimination
19 in school and elsewhere despite the rights and protections
20 afforded by Section 504 of the Rehabilitation Act, the
21 Individuals with Disabilities Education Act, and the
22 Americans with Disabilities Act.

23 (3) Diabetes must be managed 24 hours a day in order to

1 (i) avoid the potentially life-threatening, short-term
2 consequences of blood sugar levels that are either too high
3 or too low; and (ii) prevent or delay the serious,
4 long-term complications of high blood sugar levels, which
5 include blindness, amputation, heart disease, and kidney
6 failure.

7 (4) Because diabetes imposes significant health risks,
8 it is vital that schools provide a safe learning
9 environment for students with diabetes.

10 (5) The school nurse is the most appropriate person in
11 a school setting to provide care for a student with
12 diabetes. However, many schools in this State do not have a
13 full-time nurse, and even if a nurse is assigned to a
14 school, the nurse will not always be available during the
15 school day, during extracurricular activities, or on field
16 trips.

17 (6) Additional school personnel who are not health care
18 professionals need to be trained to provide routine
19 diabetes care. Taking a team approach to diabetes care
20 builds on what schools already do for children with other
21 chronic diseases such as asthma and allergies. Thus,
22 current practices and existing resources can be easily
23 adapted for students with diabetes.

24 (7) Given the significant and increasing number of
25 students with type 1 and type 2 diabetes, the potential for
26 diabetes to impede a student's ability to learn, the risk

1 for serious medical complications, and the protracted
2 processes currently required to enforce the rights and
3 protections afforded by federal law for students with
4 diabetes, the General Assembly deems it in the public
5 interest to enact the Care of Students with Diabetes Act.

6 Section 10. Definitions. In this Act:

7 "Diabetes management and treatment plan" means the
8 document developed by the student's personal physician or other
9 health care professional who specializes in the treatment of
10 diabetes that prescribes the care and assistance needed by the
11 student and that is signed by the parent or guardian and the
12 student's personal physician or other health care
13 professional.

14 "Individualized care plan" means the document developed by
15 the school with the student's parent or guardian that activates
16 the student's diabetes management and treatment plan and
17 details how the student's diabetes management and treatment
18 plan will be implemented in daycare, at school, or at
19 school-related activities and events, including field trips.

20 "Principal" means the senior administrative executive of a
21 school and includes the principal's designee or designees.

22 "School" means any public, charter, or private
23 pre-primary, primary, elementary, or secondary school located
24 in this State and includes a daycare provider.

25 "School employee" means (i) a person employed by a school,

1 (ii) a person employed by a local health department and
2 assigned to a school, or (iii) a person who contracts with a
3 school or school district to perform services in connection
4 with the care of students with diabetes.

5 "Unlicensed diabetes care aide" means a school employee who
6 is trained in routine diabetes care.

7 Section 15. Diabetes management and treatment plan. A
8 diabetes management and treatment plan must be developed for
9 each student with diabetes who seeks assistance with the
10 routine diabetes care needed in daycare, at school, or at
11 school-related activities and events, including field trips.
12 The plan must do all of the following:

13 (1) Prescribe the diabetes care that the student needs.

14 (2) Evaluate the student's ability to self-manage and
15 perform routine diabetes care.

16 (3) Be signed by the student's parent or guardian and
17 the student's personal physician or other health care
18 professional.

19 (4) Be submitted to the school (i) before or at the
20 beginning of the school year; (ii) upon enrollment of the
21 student, if the student enrolls in the school after the
22 beginning of the school year; or (iii) as soon as
23 practicable following a diagnosis of diabetes for the
24 student.

1 Section 20. Individualized care plan.

2 (a) Upon receipt of a student's diabetes management and
3 treatment plan, the school principal and the school nurse, if
4 one is assigned to the school, shall develop an individualized
5 care plan for the student with the student's parent or
6 guardian.

7 (b) An individualized care plan must be developed for each
8 student with diabetes who seeks care for diabetes in daycare,
9 at school, or at school-related activities and events,
10 including field trips. The individualized care plan must do all
11 of the following:

12 (1) Incorporate the student's diabetes management and
13 treatment plan.

14 (2) Meet the unique care needs of a particular student
15 with diabetes in a particular school.

16 Section 25. Unlicensed diabetes care aides.

17 (a) At each school in which a student with diabetes is
18 enrolled, the school principal shall do all of the following:

19 (1) Seek school employees who are not health care
20 professionals to serve as unlicensed diabetes care aides to
21 assist students with routine diabetes care.

22 (2) Provide at least one unlicensed diabetes care aide
23 if a full-time nurse is assigned to the school.

24 (3) Provide at least 3 unlicensed diabetes care aides
25 if a full-time nurse is not assigned to the school.

1 (b) An unlicensed diabetes care aide shall serve under the
2 supervision of the principal.

3 (c) A school employee must not be subject to any penalty or
4 disciplinary action for refusing to serve as an unlicensed
5 diabetes care aide.

6 Section 30. Training for unlicensed diabetes care aide.

7 (a) If a school nurse is assigned to a school, the school
8 nurse shall coordinate the training of school employees acting
9 as unlicensed diabetes care aides.

10 (b) Training under this Section must be provided by a
11 health care professional that specializes in the treatment of
12 diabetes or by the school nurse if he or she has been trained
13 in routine diabetes care. The training must be provided before
14 the beginning of the school year or as soon as practicable
15 following (i) the enrollment of a student with diabetes at a
16 school that previously had no students with diabetes or (ii)
17 diagnosis of diabetes for a student at a school that previously
18 had no students with diabetes. Thereafter, training must be
19 provided annually by a health care professional with expertise
20 in diabetes care and shall take place before the commencement
21 of each school year.

22 (c) Training under this Section must include instruction in
23 all of the following:

24 (1) The details of a student's individualized care
25 plan.

1 (2) The symptoms of hypoglycemia and hyperglycemia.

2 (3) How to test blood glucose levels and record the
3 results.

4 (4) How to administer insulin.

5 (5) The recommended schedules and food intake for meals
6 and snacks for a student with diabetes, the effect of
7 physical activity on blood glucose levels, and the proper
8 actions to be taken if a student's schedule is disrupted.

9 (6) The proper action to take if the blood glucose
10 levels of a student with diabetes are outside the target
11 ranges indicated by the student's diabetes management and
12 treatment plan.

13 (7) The symptoms and complications of diabetes that
14 require emergency assistance.

15 (8) Actions to take in response to emergency
16 situations, including when and how to administer glucagon.

17 (d) When no other unlicensed diabetes care aides will be
18 traveling with students with diabetes, every school and school
19 district shall provide training to all bus drivers responsible
20 for the transportation of students with diabetes.

21 (e) The training of school personnel under this Section
22 must meet or exceed the recommendations and guidelines set
23 forth by the American Diabetes Association.

24 (f) The school nurse or principal shall maintain a copy of
25 the training guidelines and any records associated with the
26 training.

1 Section 35. Required care of students with diabetes.

2 (a) For each school in which a student with diabetes seeks
3 assistance, the school must ensure that every day and at all
4 activities at which the student is present there is either a
5 school nurse or an unlicensed diabetes care aide to provide
6 care.

7 (b) If a school nurse is assigned to a school and the nurse
8 is available, the nurse shall perform the tasks necessary to
9 assist a student with diabetes in accordance with the student's
10 individualized care plan.

11 (c) If a school nurse is not assigned to the school or a
12 school nurse is not available, an unlicensed diabetes care aide
13 shall perform the tasks necessary to assist the student with
14 diabetes in accordance with the student's individualized care
15 plan and in compliance with any guidelines provided during
16 training.

17 (d) An unlicensed diabetes care aide may provide routine
18 diabetes care only if the parent or guardian of the student
19 signs an agreement that does both of the following:

20 (1) Authorizes an unlicensed diabetes care aide to
21 assist the student.

22 (2) States that the parent or guardian understands that
23 an unlicensed diabetes care aide is not liable for civil
24 damages.

25 (e) The school nurse and the unlicensed diabetes care aide

1 must have the emergency contact information for the student's
2 parent or guardian.

3 (f) At each school attended by a student with diabetes,
4 that school shall adopt a procedure to ensure that a school
5 nurse or at least one unlicensed diabetes care aide is
6 available to provide the required care to each student with
7 diabetes (i) during regular school hours, (ii) during
8 school-related activities and events, (iii) during before
9 school and after school programs, (iv) during field trips, and
10 (v) during extracurricular activities.

11 (g) A school shall provide to each employee responsible for
12 providing transportation for a student with diabetes or
13 supervising a student with diabetes during an off-campus
14 activity a one-page information sheet that does all of the
15 following:

16 (1) Identifies the student who has diabetes.

17 (2) Identifies potential emergencies that may occur as
18 a result of the student's diabetes and the appropriate
19 responses to such emergencies.

20 (3) Provides the telephone number of a contact person
21 in case of an emergency.

22 (h) A school district may not restrict the assignment of a
23 student with diabetes to a particular school on the basis that
24 the school does not have the required unlicensed diabetes care
25 aides.

26 (i) A student's choice of schools may not be restricted in

1 any way because the student has diabetes.

2 (j) An unlicensed diabetes care aide, like other school
3 staff, acts in loco parentis and only as authorized by the
4 student's diabetes management and treatment plan.

5 Section 40. Independent monitoring and treatment. In
6 accordance with the student's diabetes management and
7 treatment plan, a student with diabetes must be permitted to
8 perform blood glucose tests, administer insulin through the
9 insulin delivery system the student uses, treat hypoglycemia
10 and hyperglycemia, and otherwise attend to the care and
11 management of his or her diabetes in the classroom, in any area
12 of the school or school grounds, and at any school-related
13 activity or event and to possess on his or her person, at all
14 times, the supplies and equipment necessary to perform the
15 monitoring and treatment functions described in this Section.

16 Section 45. Immunity from disciplinary action and
17 liability.

18 (a) School personnel must not be held liable for civil
19 damages that may result from acts or omissions as a result of
20 the activities authorized or required by this Act that may
21 constitute ordinary negligence. This immunity does not apply to
22 acts or omissions that constitute gross negligence or willful
23 or wanton conduct.

24 (b) A school employee must not be subject to any

1 disciplinary proceeding resulting from an action taken in
2 compliance with this Act, unless that action constituted gross
3 negligence or willful or wanton conduct.

4 Section 90. The State Mandates Act is amended by adding
5 Section 8.31 as follows:

6 (30 ILCS 805/8.31 new)

7 Sec. 8.31. Exempt mandate. Notwithstanding Sections 6 and 8
8 of this Act, no reimbursement by the State is required for the
9 implementation of any mandate created by the Care of Students
10 with Diabetes Act.

11 Section 99. Effective date. This Act takes effect upon
12 becoming law.